U S Department of Labor
Office of Labor-Management
Standards
Washington, DC 20210

FORM LM-30
LABOR ORGANIZATION OFFICER AND
EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11-30-2006

This report is mandatory under P L 86-257, as amended Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440

For Official Use Only

AUG 17 2005

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| READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. |

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1 File Number U - 9300

2 Fiscal Year Covered From

1 / 1 / 2004   Through   12 / 31 / 2004

3 Name and address of person filing

Name Thomas , Widitz

P O Box, Bldg , Room No , if any

Street 4950 Medical Center Circle

City Allentown

State Pennsylvania   ZIP Code + 4 18106

4 Name, file number, and address of labor organization

Name Pennsylvania State Education Association

Labor Organization File Number 512-989

P O Box, Building and Room Number, if any P O Box 1724

Street 400 North Third Street

City Harrisburg

State Pennsylvania   ZIP Code + 4 17105-1724

5 Position in labor organization UniServ Representative

Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests
(except as specified in the exclusions set forth in the Instructions)

A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of
monetary value **from an employer whose employees your organization represents** or is actively seeking to represent

6 Name and address of Employer (including trade name, if any)

Name

Trade Name, if any

P O Box, Bldg , Room No , if any

Street

City

State   ZIP Code + 4

7 a Nature of Interest, Transaction, or Income

7 b Amount

Signature

15 Signature and verification The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete (See the section on penalties in the Instructions)

Signed *Thomas B. Widitz*

On 8/12/05
Date

800-322-9032
Telephone Number

Form LM-30 (2003)